

(REFERENCE COPY - Not for submission)

Amendment to a Non-Commercial Broadcast Stations Biennial Ownership Report

File Number: 0000168070 | Submit Date: 2022-07-06 | FRN: 0005012729

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Amendment Status: Received Status Date:

07/06/2022 Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0005012729	Ohio University

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
9 S College Street	Athens	ОН	45701	+1 (740) 593- 1771	woub@woub.

2. Contact Representative

Name	Organization
Mark Brewer	WOUB Public Media

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
9 S College Street	Athens	ОН	45701	+1 (740) 593-1771	brewer@ohio.edu

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:			
Relationship to stations/permits	Licensee		
Is the Respondent's governing board (or other governing entity) directly or indirectly under the control of another entity?		No	

(b) Provide the following information about this report:	(b) Provide the following information about this report:	
Purpose	Biennial	
"As of" date	10/01/2021	
	When filing a biennial ownership report or validating and resubmitting a prior biennial ownership report, this date must be Oct. 1 of the year in which this report is filed.	
Reason for Amendment	Amended to fix voting percentages.	

5. Licensee(s) and Station(s)

Respondent is filing this report to cover the following Licensee(s) and station(s):

Lice	nsee/Permittee Name	FRN
Ohio	o University	0005012729

Fac. ID No.	Call Sign	City	State	Service
50140	WOUZ-FM	ZANESVILLE	ОН	FM
50141	WOUC-TV	CAMBRIDGE	ОН	DTV
50142	WOUC-FM	CAMBRIDGE	ОН	FM
50143	WOUH-FM	CHILLICOTHE	ОН	FM
50145	WOUB	ATHENS	ОН	AM
50146	WOUL-FM	IRONTON	ОН	FM
50147	WOUB-TV	ATHENS	ОН	DTV
50149	WOUB-FM	ATHENS	ОН	FM

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 Documents

Licensee Respondents that hold authorizations for one or more full power television, AM, and/or FM stations should list all contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this report. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents should select "Not Applicable" in response to this question.

Document Information		
Description of contract or instrument	Public Broadcasting Service Membership Certification and Agreement (television)	
Parties to contract or instrument	Public Broadcasting Service Ohio University/WOUB Public Media	
Date of execution	06/2021	
Date of expiration	06/2022	
Agreement type (check all that apply)	Other Agreement Type: PBS Membership Agreement	

2. Ownership Interests

(a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent itself. If the Respondent is not a natural person, also list each of the officers, members of the governing board (or other governing entity), stockholders, and any other persons or entities with a direct attributable interest in the Respondent pursuant to the standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening companies or entities.) List each interest holder with a direct attributable interest in the Respondent separately.

Leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the Respondent solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i).

In the case of vertical or indirect ownership structures, list only those interests in the Respondent that also represent an attributable interest in the Licensee(s) for which the report is being submitted.

Entities that are part of an organizational structure that includes holding companies or other forms of indirect ownership must file separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not have an attributable interest in the Licensee(s) for which the report is being submitted.

Please see the Instructions for further detail concerning interests that must be reported in response to this question.

The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.

Ownership Information			
FRN	0005012729		
Entity Name	Ohio University		
Address PO Box			
	Street 1	9 S College Street	
	Street 2		
	City	Athens	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	45701	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal r	nation or Tribal entity	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
Total assets (Equity Plus)		0.0%	
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			

Ownership Information			
FRN	9990124017	9990124017	
Name	Peggy Viehweger	Peggy Viehweger	
Address	РО Вох		
	Street 1	747 Adams Road	
	Street 2		
	City	Loveland	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	45140	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		

Principal Profession or Occupation	Chemical Co. Executive - retired		
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	12.5%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
	Does interest holder have an attributable interest in one or more broadcast stations No hat do not appear on this report?		

Ownership Information			
FRN	9990124024	9990124024	
Name	Diane Smullen	Diane Smullen	
Address	PO Box		
	Street 1	609 Oxford Street	
	Street 2		
	City	Worthington	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	43085	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	VP of Corporate Affairs, Cameron Mitchell Restaurants, LLC		
By Whom Appointed or Elected	Governor	Governor	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race White		
Interest Percentages	Voting	12.5%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	

	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No	

Ownership Information				
FRN	9990124040			
Name	Cary Rodman Cooper			
Address	РО Вох			
	Street 1	42 Exmoor		
	Street 2			
	City	Toledo		
	State ("NA" if non-U.S. address)	ОН		
	Zip/Postal Code	43615		
	Country (if non-U.S. United States address)			
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Attorney			
By Whom Appointed or Elected	Governor			
Citizenship, Gender, Citizenship US		US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	12.5%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a	an attributable interest in one oreport?	or more broadcast stations No		

Ownership Information			
FRN	9990124042	9990124042	
Name	Janelle Coleman	Janelle Coleman	
Address	РО Вох		
	Street 1	7247 Poppy Hills Court	
	Street 2		

	City	Blacklick		
	State ("NA" if non-U.S. address)	ОН		
	Zip/Postal Code	43004		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Member of Governing	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Community Engagement and Diversity, Equity, Inclusion			
By Whom Appointed or Elected	Governor			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	Black or African American		
Interest Percentages	Voting	12.5%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have that do not appear on this	an attributable interest in one creport?	or more broadcast stations	No	

Ownership Information			
FRN	9990124046		
Name	Steve Casciani		
Address	PO Box		
	Street 1	8321 River Rock Lane	
	Street 2		
	City Delaware		
	State ("NA" if non-U.S. OH address)		
	Zip/Postal Code	43015	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Venture Capitalist and Energy Entrepreneur		

By Whom Appointed or Elected	Governor		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	12.5%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one creport?	or more broadcast stations No	

Ownership Information			
FRN	9990139306		
Name	Matthew Evans		
Address	PO Box		
	Street 1	2238 Yorkshire Road	
	Street 2		
	City	Columbus	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code 43221		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	President, Boich Companies		
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race White		
Interest Percentages	Voting	12.5%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	

Does interest holder have an attributable interest in one or more broadcast stations	
that do not appear on this report?	

No

Ownership Information				
FRN	9990139307			
Name	Eileen Sheil			
Address	PO Box			
	Street 1	998 Gilpin Circle		
	Street 2			
	City	Erie		
	State ("NA" if non-U.S. address)	СО		
	Zip/Postal Code	80516		
	Country (if non-U.S. United States address)			
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Corporate Communications, Cleveland Clinic			
By Whom Appointed or Elected	Governor			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a that do not appear on this	an attributable interest in one o	or more broadcast stations No		

Ownership Information			
FRN	9990139811	9990139811	
Name	David Moore	David Moore	
Address	PO Box		
	Street 1	6379 Gura Road	
	Street 2		
	City	Athens	

	State ("NA" if non-U.S. address)	ОН		
	Zip/Postal Code	45701		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer	Officer		
Principal Profession or Occupation	Professor, Board Secretary, Ohio University			
By Whom Appointed or Elected	Board of Trustees			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have that do not appear on this	an attributable interest in one c	or more broadcast stations	No	

Ownership Information			
FRN	9990144589		
Name	Ellen M. Gill-Franks		
Address	PO Box		
	Street 1	33 W. State Street	
	Street 2		
	City Athens		
	State ("NA" if non-U.S. OH address) Zip/Postal Code 45701		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Student TrusteeMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	Student, Ohio University		
By Whom Appointed or Elected	Governor		

Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations No

Ownership Information			
FRN	9990144590		
Name	Lorrie L. Platt		
Address	РО Вох		
	Street 1	10473 Storybook Dr.	
	Street 2		
	City	Montgomery	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	45242	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Business Communication		
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	us	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Asian, White	
Interest Percentages	Voting	12.5%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this re	n attributable interest in one of eport?	r more broadcast stations	No

Ownership Information			
FRN	9990144591		
Name	Sarah Ladipo	Sarah Ladipo	
Address	РО Вох		
	Street 1	363 Richland Ave.	
	Street 2	Apt. 270	
	City	Athens	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	45701	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Student TrusteeMember of Governing Board (or other governing entity)		
Principal Profession or Occupation	Student, Ohio University		
By Whom Appointed or Elected	Governor	Governor	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations No	

Ownership Information		
FRN	9990144592	
Name	Jeff Laturell	
Address	PO Box	
	Street 1	6340 Inland Shores Dr.
	Street 2	
	City	Mentor
	State ("NA" if non-U.S. address)	ОН
	Zip/Postal Code	44060

	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	VP of Finance and Treasurer			
By Whom Appointed or Elected	Alumni Association Representative			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have a that do not appear on this	an attributable interest in one o	r more broadcast stations No		

Ownership Information			
FRN	9990144593		
Name	Scott Borgemenke	Scott Borgemenke	
Address	PO Box		
	Street 1	8830 Birgham Ct N	
	Street 2		
	City	Dublin	
	State ("NA" if non-U.S. address)	ОН	
	Zip/Postal Code	43017	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	SVP for Advocacy and Communications		
By Whom Appointed or Elected	Governor		
Citizenship, Gender, Ethnicity, and Race Information (Natural	Citizenship	US	
	Gender	Male	
Persons Only)			

	Ethnicity	Not Hispanic or Latino
Interest Percentages (enter percentage values from 0.0 to 100.0)	Race	White
	Voting	12.5%
	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have that do not appear on this	an attributable interest in one or report?	r more broadcast stations No

Ownership Information				
FRN	9990145053	9990145053		
Name	Misty Crosby	Misty Crosby		
Address	PO Box			
	Street 1	1400 Pike St.		
	Street 2			
	City	Marietta		
	State ("NA" if non-U.S. address)	ОН		
	Zip/Postal Code	45750		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Executive Director of an 8-county Council of Governments			
By Whom Appointed or Elected	Board of Trustees	Board of Trustees		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race White			
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations No		

Ownership Information	
FRN	9990145054

Name	Anna Harvey	Anna Harvey		
Address	РО Вох			
	Street 1	7 Washington Square North, 0	6A	
	Street 2			
	City	New York		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	10003		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Professor of Politics, New York University and President, Social Science Research Council			
By Whom Appointed or Elected	Board of Trustees			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	No	
• •	nat any interests, including equivalent and interests, including equivalent and are non-attributable.	ty, financial, or voting	Yes	

(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
If "Yes," complete the information in the required fields and submit an Exhibit fully describing that individual's duties and responsibilities, and explaining why that individual should not be attributed an interest.	

3. Organizational Chart (Licensees Only)

Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all entities that have attributable interests in the Licensee. Licensees with a single parent entity may provide a brief explanatory textual Exhibit in lieu of a flowchart or similar document. Licensees without parent entities should so indicate in a textual Exhibit.

Section III - Certification

Certification

Section	Question	Response
Authorized Party to Sign	WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND /OR REVOCATION OF ANY STATION LICENSEOR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).	
Certification	I certify that I have examined this report and that to the best of my knowledge and belief, all statements in this report are true, correct and complete.	Official Title: General Manager Exact Legal Title or Name of Respondent: Ohio University Name: Mark Brewer Phone: 7405934785 07/06/2022